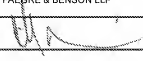
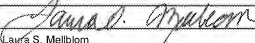


TRANSMITTAL FORM	Application Number	09/741,843, confirmation 9659	
	Filing Date	12/22/2000	
	First Named Inventor	Leung	
	Art Unit	1644	
	Examiner Name	Schwadron	
(to be used for all correspondence after initial filing)		Attorney Docket Number	329206
Total Number of Pages in This Submission		6	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below). One foreign reference 15 Non-patent literature references
<div style="border: 1px solid black; padding: 2px;"> Remarks The Director is hereby authorized to charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17; credit any overpayments to the Deposit Account No. 06-0029. </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	FAEGRE & BENSON LLP		
Signature			
Printed Name	Richard A. Nakashima		
Date	2/19/07	Reg. No.	42,023

CERTIFICATE OF TRANSMISSION/MAILING			
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